ABSTRACT OF THE DISCLOSURE

Presbyopia is treated by implanting within a plurality of elongated pockets formed in the tissue of the sclera of the eye transverse to a meridian of the eye, a prosthesis having an elongated body having a first surface and a second surface opposite the first surface to contact the base and flap of the scleral pocket. The first and second surfaces are spaced apart a distance so that the implanted prosthesis exerts an outward force on the flap of the scleral pocket which results in an outward traction on at least the anterior margin of the scleral pocket. The combined effect of the implanted prostheses is to exert a radially outward traction on the sclera in the region overlying the ciliary body which expands the sclera in the affected region together with the underlying ciliary body. The expansion of the ciliary body restores the effective working distance of the ciliary muscle in the presbyopic eye and thereby increases the amplitude of accommodation. Hyperopia, primary open angle glaucoma and/or ocular hypertension can be treated by increasing the effective working distance of the ciliary muscle according to the invention. A preferred embodiment of the scleral prosthesis has a major surface adapted to contact the base or flap of the pocket and an opposite surface or ridge spaced from the major surface.